





#### Depression, Anxiety and Stress Scale (DASS-21): Score vs Severity

|                 | Depression | Anxiety | Stress  |
|-----------------|------------|---------|---------|
| Normal          | 0-9        | 0 - 7   | 0 - 14  |
| Mild            | 10 - 13    | 8 - 9   | 15 - 18 |
| Moderate        | 12 - 20    | 10 - 14 | 19 - 25 |
| Severe          | 21-27      | 15 - 19 | 26-33   |
| ctremely Severe | 28+        | 20+     | 34+     |

### IMPROVING THE PERCENTAGE OF STUDENTS RECEIVING THEIR PSYCHOLOGY STATUS EARLY

Ex

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### INTRODUCTION

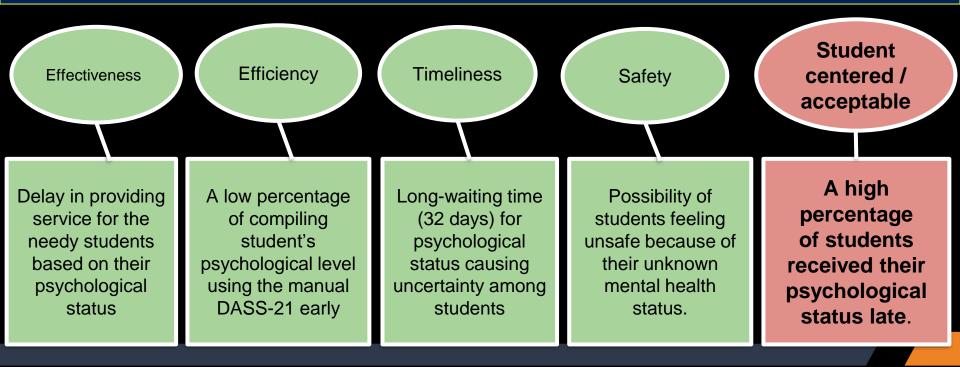
The current practice in the ILKKM setting is that only students referred to the counselling unit are being assessed manually for mental state periodically by the counsellor, which is time-consuming, burdensome, and delayed in producing results— causing delay in students getting their slots for therapy.

According to Fauzi et al. (2021), the prevalence of anxiety, stress and depression among health science students is 66 to 74 %.

Timely detection and management of mental health disorders among students are essential to safeguard public health.



### **1. SELECTION OF OPPORTUNITIES FOR IMPROVEMENT**





## Method

#### How does it happen?

The task to assess all student in a short period of time

H

W

**5W1H** 

5

W

#### What is the actual problem?

Notification of psychological assessment of 484 students delayed to 32 days.

#### Where does it occur?

Institut Latihan Kementerian Kesihatan Malaysia, SAS

#### Who is affected?

2 W

Students of Allied Health Science

#### Why does the problem happen?

Lack of manpower, do not have simplified method to assess student

When does it happen? During academic phase



### **BRIEF DESCRIPTION OF CONTEXT**

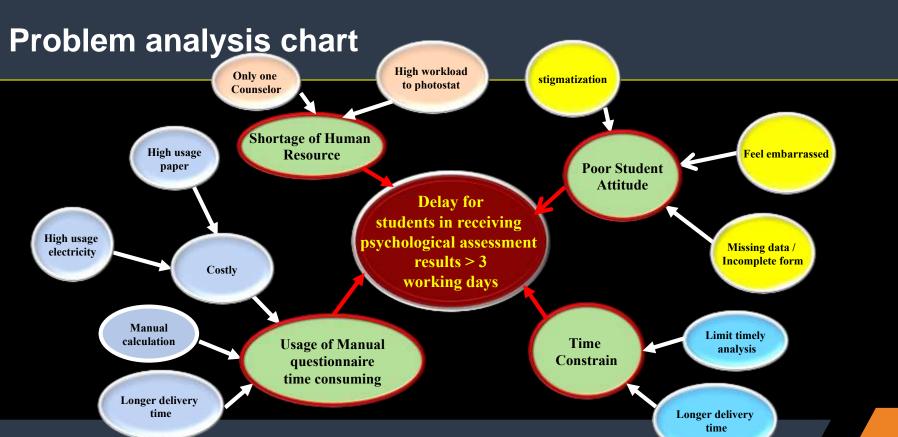
Training can become stressful because student's first experience with a patient, thus require a continuous assessment of mental health throughout their training period (Beiter et al., 2015)



### Problem chosen based on S.M.A.R.T. approach

| Proposed topic  | Serious or<br>specific | Measurable | Appropriate | Relevant /<br>remediable | Timely | T     |
|---|------------------------|------------|-------------|--------------------------|--------|-------|
| 1. A high percentage of students received their<br>psychological status more than 1 working day                     | 18                     | 18         | 18          | 18                       | 18     | , 108 |
| 2. Delay in providing service for the needy students based on their psychological status                            | 18                     | 18         | 15          | 15                       | 15     | 81    |
| 3. A low percentage of compiling student's<br>psychological level using the manual questionnaire<br>(DASS-21) early | 15                     | 12         | 15          | 15                       | 15     | 72    |
| 4. Long-waiting time (32 days) for psychological status<br>causing uncertainty among students                       | 18                     | 15         | 15          | 15                       | 15     | 78    |
| 5. Possibility of students feeling unsafe because of their unknown mental health status.                            | 15                     | 12         | 15          | 15                       | 15     | 72    |







| Causes of delay in Delivering the psychological status | Frequency, n | Percentage | Cumulative frequency | Cumulative<br>Percentage |
|--|--------------|------------|----------------------|--------------------------|
| Usage of manual questionnaire                          | 230          | 46%        | 230                  | 46%                      |
| Time constraint  | 170          | 34%        | 400                  | 80%                      |
| Access problem for students                            | 70           | 14%        | 470                  | 94%                      |
| Shortage of human resource                             | 30           | 6%         | 500                  | 100%                     |

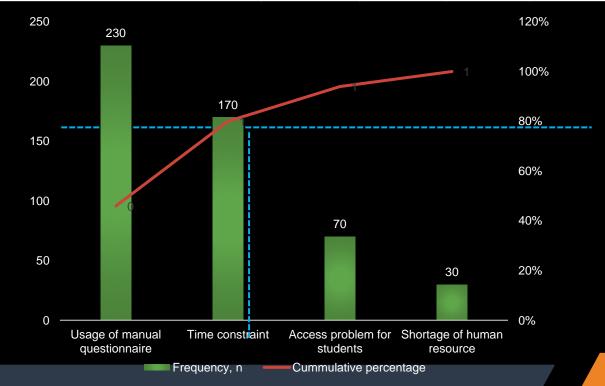


Figure 1 : Pareto Chart – Causes of delay in delivering the psychological status



| Causes of d<br>psychologic | elay in Delivering the<br>al status                       | Frequency, n | Percentage                 | Cumulative<br>frequency | Cumulative<br>Percentage |
|----------------------------|---|--------------|----------------------------|-------------------------|--------------------------|
| Manual calc                | ulation   | 130          | 26%                        | 130                     | 26%                      |
| Longer deliv               | very time   | 120          | 24%                        | 250                     | 50%                      |
| High cost - p              | paper   | 90           | 18%                        | 340                     | 68%                      |
| High cost - p              | ohotostat   | 80           | 16%                        | 420                     | 84%                      |
| Missing data               | a   | 60           | 12%                        | 480                     | 96%                      |
| Student attit              | ude   | 10           | 2%                         | 490                     | 98%                      |
| Staff issule               | 130   | 10           | 2%                         | 500                     | 100%                     |
| 120                        | 120   |              |                            |                         |                          |
| 100                        | 90  | 80 84        | -969                       | 8 100                   | 100%                     |
| 80 <b>-</b><br>60          | C   |              | 0                          |                         | 80%<br>60%               |
| 40                         | 50  |              |                            |                         | 40%                      |
| 20                         | 26  |              | 10                         | 10                      | 20%                      |
| 0                          | Manual Longer High cos<br>Calculation delivery time paper |              | g data Student<br>attitude |                         | 0%                       |
|                            |   |              |                            |                         |                          |

Cummulative percentage

Figure 2 : Pareto Chart – Causes of delay in delivering the psychological status



### **Problem statement**

#### **Problem**

A manual psychological assessment consists of 3 sub-scale-depression, anxiety & stress, conducted from April– May 2021 (500 students in ILKKMSAS) revealed 96.8% of Students received their psychological assessment done >3 working days

#### <u>Cause</u>

Multiple factors including manpower, information system collaboration, attitude and current working culture may contribute to this problem.

#### Effects

The intervention delay will affect student's therapy plan, deterioration of student's psychological status, affecting academic performance from the study.

#### The aim of the study

This study aims to improve the percentage of students receiving the psychological assessment early by the counsellor.



### **General objective**

# The main objective is to **improve the percentage** of students receiving the psychological assessment **early**



1. To verify the percentage of students who receives their psycholo gical status more than three working days.



 To identify the contributing factors to the delay of students receiving their psychological assessment results.



3. To formulate and implement the transformation approach in student's psychological status early.



4. To evaluate the effectiveness of the transformation in assessing student's psychological status early.



### **Definition of terms**

#### **Students**

The students enroll for a 3year programme at the College of Allied Health Sciences Sultan Azlan Shah.

The basic programmes are Diploma of nursing, Diploma of Medical Assistant, Diploma of Pharmacy and Certificate of Public Health. Receiving their psychological status

Psychological status comprising depression, anxiety and stress in a 3-piece assessment. The DASS-21 is adapted from Lovibond & Lovibond (1995)

Early –

1 working day



### Background – Evidence to support choice of the measures

(Ramli et al., 2012; Musa & Maskat, 2020). Evaluation of the psychometric properties in **Bahasa Malaysia** DASS-21 among non-Malaysia in Malaysia revealed good **reliability** and **validity**, implying the scales can be used in a multi-ethnic population in Malaysia.

A cross-sectional study - UiTM Puncak Alam, Malaysia, 478 (Medical Lab Sciences, Medical Imaging, Nursing) Selfadministered DASS-21 questionnaires - students to be **filled up within 20 minutes** 

(Fauzi et al., 2021)



### 2. KEY MEASURES FOR IMPROVEMENT

6. Acceptable User-friendly Applicable to all students & staff

#### 5. Feasible to get data

Centralised data securely Protective

4. Validity Ensure back-up every 6 months to prevent crashing

#### 3. Reliability Constant Authorized

personnel

#### 2. Comprehensiveness

Comprehensive tracking lastassessment

**1. Specificity** -Screen based questionnaire -auto-generated results in 3 mins

**Good indicators** required for the improvement for Webbased DASS-21



#### Manual DASS-21

## Percentage of students receiving their psychological assessment \_\_\_\_16 (3.2%)



484 (96.8%)

1 working day

More than 1 working day

16 students = 1 working day 500 students = 32 working days



### **INDICATOR AND STANDARD**

| INDICATOR | All students in a semester should receive their psychological assessment (PA) within 1 working day by a counsellor.                       |
|-----------|---|
| FORMULA   | The number of students per semester who receive PA (1 working day) x 100 All students per semester should receive their PA in working day |
| STANDARD  | The standard for the indicator is at least 90% based on Quality Assurance Project Team consensus.   |

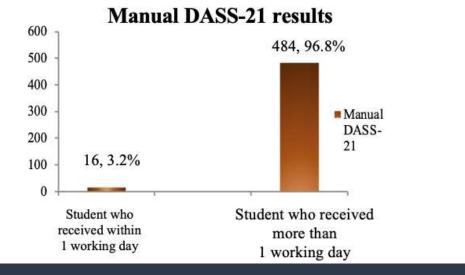


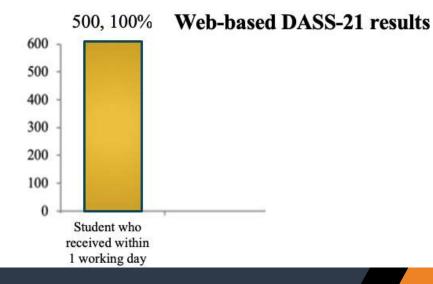
### 3. PROCESS OF GATHERING INFORMATION

| Study design<br>Study setting<br>Population     | Sample size & technique               | Time Frame                    | Instrument  | Inclusion & exclusion criteria   |
|---|---------------------------------------|-------------------------------|---|--|
| 01  | 02                                    | 03                            | 04  | 05   |
| - Cross-sectional<br>ILKKMSAS<br>Basic students | 500 students<br>Universal<br>sampling | 5 months<br>(Mac – July 2021) | DASS-21 – 21 items<br>Checklist-Contributing<br>factors on delay<br>Checklist-<br>transformation effect | Inclusion: All basic<br>students (4 courses)<br>registered<br>Exclusion: Unwell<br>during study period |



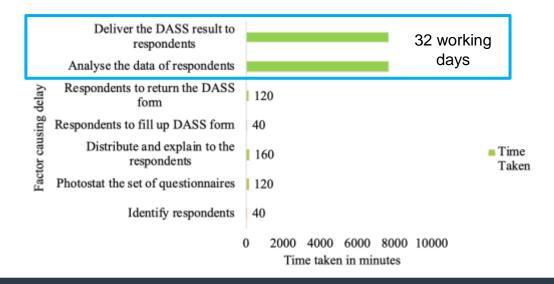
Finding: Comparison between percentage of students who receives their psychological status using Manual and Web-based DASS-21 results







The contributing factors to the delay of students receiving their psychological assessment results.





The implementation of transformation approach obtaining students's psychological status early.

The Quality Assurance project team managed to create a web-based DASS-21

#### Web-Based DASS-21



Pentadbir

#### SELAMAT DATANG KE SISTEM WEB-BASED DASS-21 UNIT PSIKOLOGI KAUNSELING, ILKKM SULTAN AZLAN SHAH

Sistem Web Based DASS-21 merupakan aplikasi untuk mengukur tahap kemunangan (Depression), tahap kebimbangan (Anxiety) dan tahap tekanan (Stress) serta Gaya Daya Tindak. Dengan ujian saringan ini, anda boleh ketahui status kesihatan mental anda dan tahap gaya daya bertindak terhadap musalah kesihatan mental anda. Ujian ini hanya berfungsi sebagai saringan awal dan pengesahan diagnosis oleh pegawai perubatan adalah diperlukan.





The effectiveness of the transformation is assessing student's psychological status early.





### Findings

- i. Time taken to obtain a result from the Manual DASS-21 is 32 days.
- ii. The problem **does not immediately address** the issues of students suffering from stress, anxiety and depression.
- iii. Web-based DASS-21 result in 1 working day.
- iv. The counselor could plan the therapy for the students within 3 working days and fulfill the key performance index.
- v. Save operational cost for 500 student = RM3250.20 period of 5 years



### 5. STRATEGY FOR CHANGE

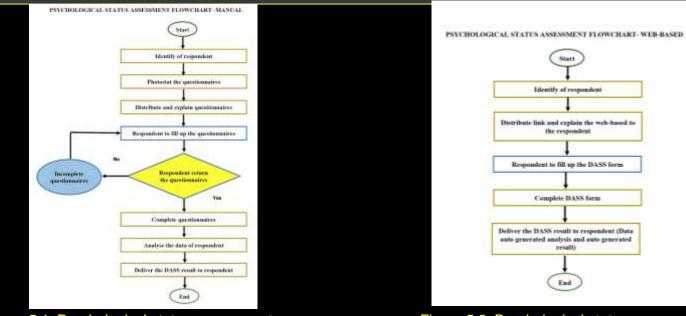
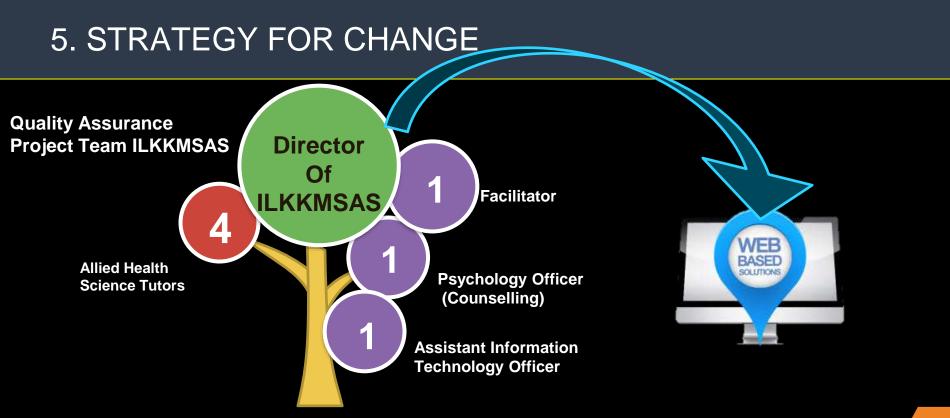


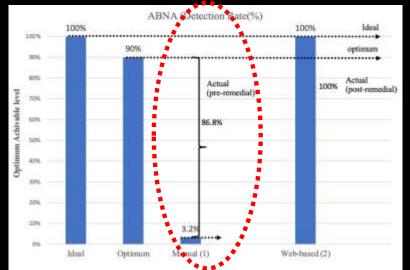
Figure 5.1: Psychological status assessment flowchart – Manual DASS-21

Figure 5.2: Psychological status assessment flowchart – Web-based DASS-21









#### The changes or innovation lead to improvement.

Figure 6 : Illustrates effects of change on ABNA

Percentage increased from 3.2% in phase 1, improved to 100% in phase 2

Achievable benefit not achieved (ABNA) was improved from 86.8% to 100% finally. - Reduced the time duration from 32 working days to 1 working day & maintain the higher percentage of student's psychological assessment



#### How did you know that the improvement had taken place?



The improvement had taken place – helped to reduce operational cost (paper, photostat, electricity)

Early assessment - students with optimum mental health

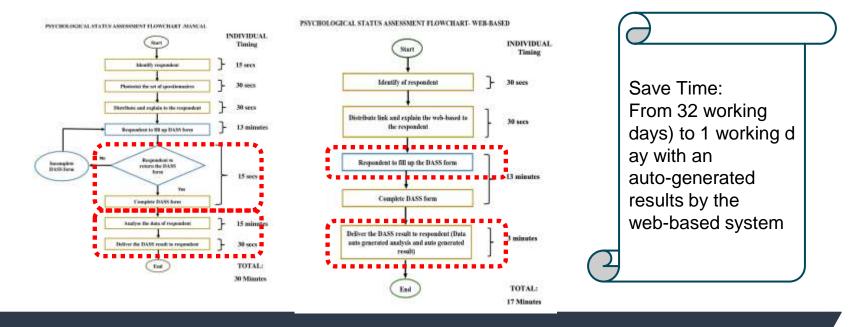
Prevent substances abuses, suicidal attempt, drop out



Better academic achievement, good patient care



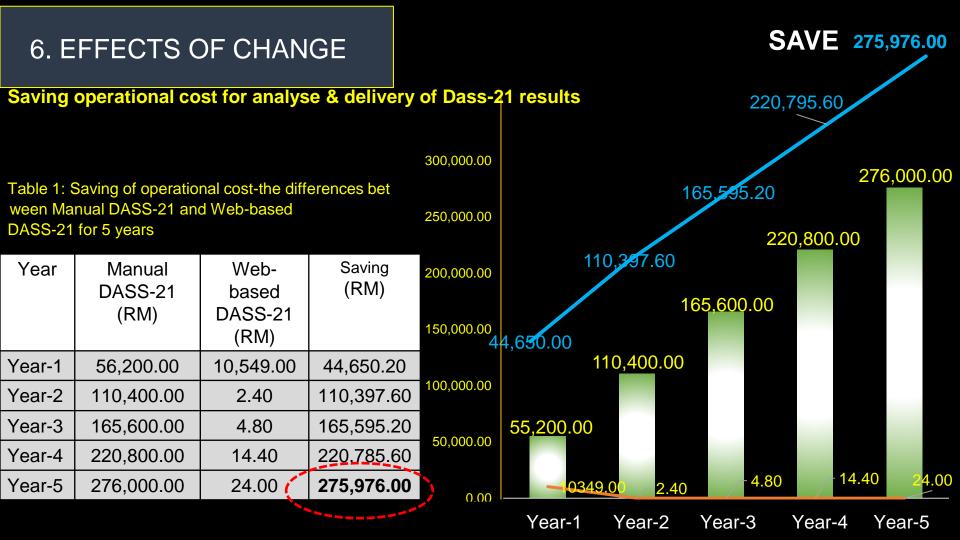
#### Shorten time for analyse & delivery of Dass-21 results to respondents



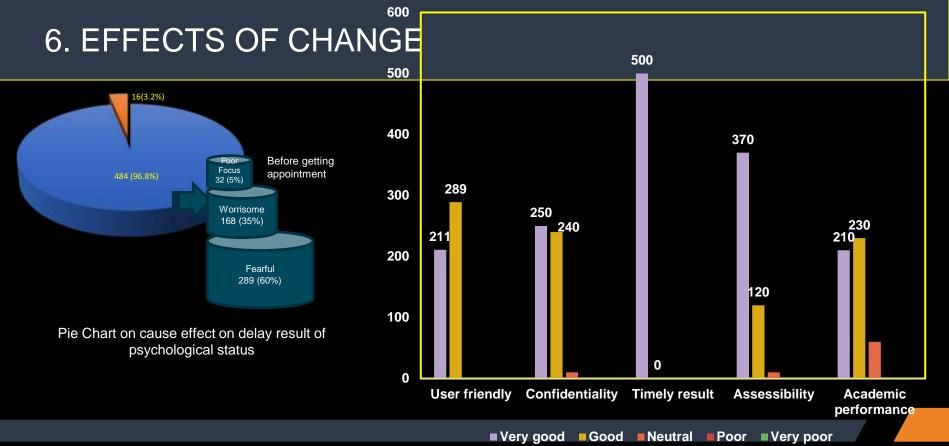


### MODEL OF GOOD CARE

| Process Criteria  |  | Standard |                     | Cycle 1<br>Pre- Remedial |                                  | Cycle 2<br>Post Remedial |               |
|---|--|----------|---------------------|--------------------------|----------------------------------|--------------------------|---------------|
|   |  | %        | Time                | %                        | Time                             | %                        | Time          |
| Staff make sure<br>Screening tools<br>available                             | Psychology officer/Course-<br>coordinators must inform<br>students to respond DASS-21            | 100%     | ≤ 1 hour            | 100%                     | 30 min                           | 100%                     | 2 seconds     |
| Psychology officer /<br>Course –coordinators<br>identify the<br>respondents | Ensure the students for psychological assessment were selected and are informed.                 | 100%     | 15 seconds          | 100%                     | 10 min                           | 100%                     | 13 seconds    |
| Psychology officer /<br>Course-coordinators<br>prepare DASS-21              | Psychology officer / Course-<br>coordinators explain the rules &<br>regulations of using DASS-21 | 100%     | 30 seconds          | 100%                     | 280 min                          | 100%                     | 30 second     |
| Students to fill up<br>DASS form  | Psychology officer / Course-<br>coordinators gives gentle<br>reminder                            | 100%     | 30 minutes          | 100%                     | 40 minutes                       | 100%                     | 13 minutes    |
| Psychology officer<br>receive the DASS<br>form                              | Psychology officer checks the result   | 100%     | ≤ 3 working<br>days | 3.2%<br>96.8%            | 1 working day<br>32 working days | 100%                     | 1 working day |











### Achievement

Web-based DASS-21 innovation clearly shows improvement in standard of student counseling.

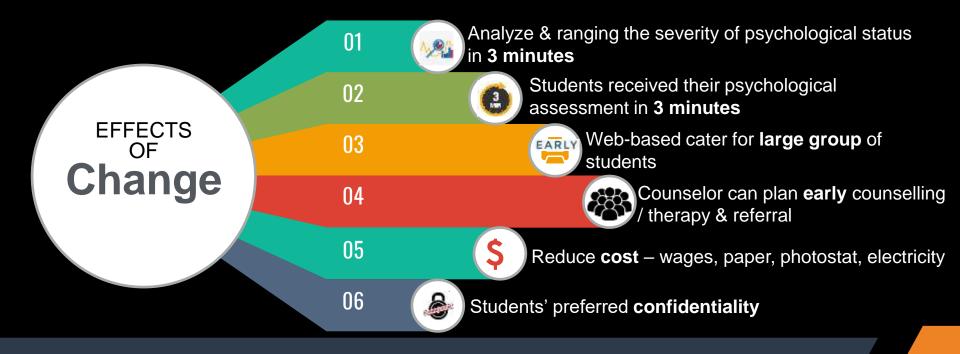


Mental health issues are a serious problem that needs to be apprehended early by the Training Management Division, MOH.

Ensure the wellness of the students are in good condition that required to be in a healthy state of mind – health care service in future.



#### 6. EFFECTS OF CHANGE





#### 7. THE NEXT STEP

All students enrolled in ILKKM will have to undergo mental state assessment throughout their study period.

The Web-based DASS-21 will be implemented throughout ILKKM in Malaysia

The study was presented to the Committee of Quality in Training Management Division in August 2022.



#### 8. VISION, MISSION, OBJECTIVES

#### VISION:

As leading Institute for Educational Excellence in Healthcare

# VISION, MISSION AND OBJECTIVES OF ILKKM

# MISSION:

To produce knowledgeable, skillfull, competitive and noble human capital through the enhancement of learning to advance healthcare services.

#### OBJECTIVES:

- Develop highly skilled and competent human capital with the ethical standards.
- Develop intellectual intelligence through the mastery of knowledge.
- Develop individuals' potential holistically.
- Develop balanced and inclusive allied health professionals with spiritual, intellectual, emotional, social and physical qualities.
- Nurture values of lifelong learning and evidence based proctice' in education



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#### Acknowledgement

**Director of ILKKMSAS Deputy Director of Academic Affair Deputy Director of Students Affair** Head of Evaluation and Quality Head of Programme **Facilitator** Information Technology (IT) Unit **Psychology and Counseling Unit** Pertubuhan Kebajikan Pelatih (PKP)





#### Gantt chart

|     |  | GANTT CHART FOR QA/QI PROJI | CT YEA   | 3 2021 |     |              |        |     |      |     |
|-----|--|-----------------------------|----------|--------|-----|--------------|--------|-----|------|-----|
|     |  | EMENTERIAN KESIHATAN MALA   |          |        |     |              | ĸ      |     |      |     |
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|     |  |                             |          |        | 1   | TAHU         | N 2021 |     | r    |     |
| BIL | TIME                                     | PERSON IN-CHARGE            | MARCH    | APRIL  | MAY | JUNE         | JULY   | AUG | SEPT | ост |
|     |  |                             |          |        |     |              |        |     |      |     |
| 1   | COMMITTEE ESTABLISHMENT                  | DR HAYMALATHA A/P RAJAGAM   |          |        |     |              |        |     |      |     |
|     |  |                             |          |        |     |              |        |     | 1    |     |
| 2   | BRAINSTORMING AND PROBLEM SELECTION      | ALL TEAM MEMBERS            |          |        |     |              |        |     |      |     |
|     |  | DR HAYMALATHA A/P RAJAGAM   |          |        |     |              |        |     |      |     |
| 3   | VERIFICATION STUDY & PROBLEM ANALYSIS    | & ALL TEAM MEMBERS          |          |        |     |              |        |     |      |     |
|     |  |                             |          |        |     |              |        |     |      |     |
| 4   | REMEDIAL ACTION IMPLEMENTATION           | ALL TEAM MEMBERS            |          |        |     |              |        |     |      |     |
|     |  | DR HAYMALATHA A/P RAJAGAM   |          |        |     |              |        |     |      |     |
| 5   | RE-EVALUATION (CYCLE 1)                  | & ALL TEAM MEMBERS          |          |        |     |              |        |     |      |     |
|     |  |                             |          |        |     |              |        |     |      |     |
| 6   | DISCUSSION AND REMEDIAL ACTION (CYCLE 2) | ALL TEAM MEMBERS            |          |        |     |              |        |     |      |     |
|     |  |                             |          |        |     |              |        |     |      |     |
| 7   | RE-EVALUATION (CYCLE 2)                  | DR HAYMALATHA A/P RAJAGAM   |          |        |     |              |        |     |      |     |
|     |  |                             |          |        |     |              |        |     |      |     |
| 8   | DISCUSSION/SHARING SESSION/PRESENTATION  | ALL TEAM MEMBERS            |          |        |     |              |        |     |      |     |
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#### CHECKLIST : PROCESS OF DASS-21 DATA COLLECTION

Name of institution

Name of counselor

Date of commencing data collection

| 1 [4   h          | Identify respondent<br>Photostat the set of question<br>Distribute and explain to the<br>Respondent to fill up DASS | onnaires<br>Ne respondent | Period of time (minute/sec)              |
|-------------------|---|---------------------------|--|
| 4                 | Distribute and explain to the   | onnaires<br>le respondent |  |
| 1 [4   h          | Distribute and explain to the   | e respondent              |  |
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#### DASS-21 Surring Instructions

The (AGD-21 about not to used to replace a four to face stirled interview. If you are experimenting significant Internet and a second second

#### Dispression, Anotely and ferens Scale - 22 Nerros (DASE-23)

The Depression: Accesty and Derry Scate: 21 Nerve (2022 21) is a set of show self-report scales decipted to consistent the ecological states of degraticity, evolvely and shows

Facts of the larver (MSS 21 wellsy contains 7 items, should into saturated with contar contents. The depression unde appenden gruppens, hopedenenses, devaluation of Me, asth-dependence), but and intervent / michlanmant, autority of and function. The analogy is also an experience autority of another, character affairing, influention of proving, and subjective experience of anning effect. The stress such is annother to leach of choice nonassociety around it assesses detroity entrology converse around, and being analy open / agriculation / gran marries and reported in Scores for approaching density and strain are calculated by automing the scores for the primare statue.

The DASK 21 is based on a demonstrate rollow than a categorital conception of prochological desirator. The enterpotent on which the DASS-21 development was haven don't which was performed by the research data) is Inter the differences between the dependence, are lety and the second adjustment on normal subjects and these populations are exactly differences of degree. The Oxfor 21 therefore has no direct originations has one administer of participation to discrete theprotein calingeries and plated in classification vyberies excluse the DS&F altor ICD

Recommended dat off scheme for conventional scheme (above shortwat, moderate; several) one as follows:

hig howes so the black 21 with need to be multiplied by 2 to calculate the third active.

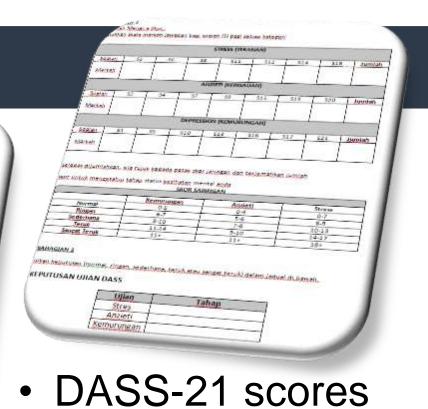
| Income          | Destructor | distany | 1      |
|-----------------|------------|---------|--------|
|                 | 1 160      | 1 00    | Stread |
| (MW             | 10.57      |         | 0.44   |
| Silver also     | 1 14-10    | 0.0     | -29.28 |
| Friend I        | 12-27      | 1 30-14 | 16-25  |
| ritemeti Setara | 244        | 1 12-28 | 36.72  |
|                 | 244        | 1 22-   |        |

ermann 514 A fannhand P.F. (1990). Manyai ke the Depression America & Streep Tealers (J = For Define). Psychology Formations

DASS-21



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| distributions s<br>filter ware to cooperate<br>filteration pairs ware<br>filteration for the second second<br>filteration for the second second<br>filteration for the second | ts May AvcMater Januaryon Balata massarii (k.d. 8.3) vevra mitoraanii tokenhan<br>WAGEV vevra lapaa filolo addi Januaryon Kala Seriou Ateo Antol.<br>Materahi Magaka Muta Mahatera Balaranen.  |
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| Factors identified    | MANUAL DASS-21 | WEB-BASED DASS-21 |
|-----------------------|----------------|-------------------|
| Tools                 |                |                   |
| Human resource        |                |                   |
| Staff wages           |                |                   |
| Cost of tools         |                |                   |
| Cost of electricity   |                |                   |
| Cost of photostat     |                |                   |
|                       |                |                   |
|                       |                |                   |
| Time taken to deliver |                |                   |
| the psychological     |                |                   |
| assessment            |                |                   |
|                       |                |                   |
|                       |                |                   |
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|                       |                |                   |
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